

## STATEWIDE PROGRAM STANDING COMMITTEE FOR ADULT MENTAL HEALTH

Meeting Notes  
October 2, 2006

MEMBERS: Kitty Gallagher, Lyn Parker Haas, David Mitchell, Clare Munat, Sue Powers, and Marty Roberts

DMH STAFF: Melinda Murtaugh, Frank Reed, and Terry Rowe

OTHERS: Butch Alexander, Richard Allain, Lynn Colby, Michael Hartman, Sandy Knight, Leslee Tocci, and Dwight Walker

### **Facilitation**

Clare Munat facilitated today's meeting.

### **Introductions and Approval of Minutes**

People who were present introduced themselves. Three new faces were Sandy Knight and Dwight Walker, prospective members of the Standing Committee, and Lynn Colby, who is interested in being on the Vermont State Hospital Governing Board.

Members had three sets of notes to approve: those for June 12, July 31, and September 11. All three sets of notes were approved with the amendments suggested by Marty for those for September 11.

### **November Meeting**

The November meeting has been moved from the thirteenth to the sixth so that the Children's Standing Committee can join the Adult Standing Committee and other members of Vermont's Mental Health Block Grant Planning Council on that date to review and provide input on the Fiscal Year 2006 report to the Center for Mental Health Services. The Adult Standing Committee will meet from 11:00 a.m. until 1:45 p.m. (meeting to include a working lunch). The Planning Council will meet from 2:00 until 4:00 p.m., place to be determined. Information about the changed date and time of both meetings will be publicly noticed and posted on the Vermont Department of Health's Web site.

### **Update on the Vermont State Hospital (VSH): Terry Rowe**

The Department of Justice (DOJ) will pay a return visit to the State Hospital October 16-18, with an exit conference on the morning of October 19. The purpose of the exit conference is to give a report of DOJ's preliminary findings on this first follow-up visit after the settlement agreement that was reached this past summer. Visits of this kind will occur at roughly six-month intervals until VSH satisfies all DOJ settlement criteria.

Terry distributed a table summarizing VSH patient grievances during August 2006. Twenty-six grievances were submitted, and all twenty-six were investigated within the thirty-day time limit for this process. No patterns or trends of concern were identified. Clare asked how many patients are involved in their treatment planning. Terry answered that VSH does not have hard data. Clare suggested that patient involvement could be a good Quality Management measure. Kitty Gallagher asked how well VSH respects a patient's WRAP (Wellness Recovery Action Plan, for what things work best in a crisis). Again, Terry said, we just do not have hard data, but she offered to look into gathering further information. Finally, Terry offered to look into Richard Allain's inquiry about exercise equipment at the State Hospital.

Next Terry distributed VSH's policy on Policy Development. She emphasized the importance of step nos. 10 and 11 in the implementation of policies:

- 10) The VSH Executive Director will notify staff of approved policies either through memo or training
- 11) Policies will be placed into hard-copy manuals located throughout the VSH as well as placed in the electronic file

### **Re-designation of Washington County Mental Health Services**

Michael Hartman and Leslee Tocci, Co-Directors of WCMHS's Community Rehabilitation and Treatment program, came to today's meeting to respond to members' questions that arose at the September 11 meeting. Michael earlier provided a written response, and so did the Division of Mental Health (DMH), both of which Standing Committee members have already seen. There was general agreement that Washington County needed to do a better job of distributing information about Durable Powers of Attorney (DPOAs) and that the agency has already taken satisfactory remedial action. A complicating factor from the agency's point of view has been an almost 100 percent turnover of direct-service staff over the past couple of years and, thus, a need for additional training for the new staff.

In regard to crisis plans, Leslee talked about the tension between client-chosen goals and client-centered language, on the one hand, and, on the other, the necessity for record entries that are clinically oriented to demonstrate compliance with Medicaid requirements for services delivered. Washington County prefers the less formal client-centered approach but appreciates the obligation to meet Medicaid requirements. Indeed, in the first days of the introduction of case rates for CRT in Vermont, WCMHS left it up to the client whether or not even to have a crisis plan. As a result of the last records review, however, the agency agreed that clients who are utilizing Emergency Services fairly regularly need to have a crisis plan whether they want one or not. The more client involvement in any treatment planning, the better.

The complementary wellness program at Washington County Mental Health is hanging by a thin thread now, Michael told the Standing Committee. The agency is trying to obtain grants for a whole variety of helpful supports for which Medicaid will not pay (acupuncture, massage and other therapies, for example). Since the original nurse practitioner who developed the program left, it has been in decline. One bright spot in funding is a \$15,000 grant this year from the legislature for a smoking-cessation program. Overall, the wellness emphasis is still very much present, Michael said, and there is hope for better funding in the next fiscal year.

Lyn Haas asked how proactive Washington County can be in meeting clients' needs. Leslee thought that a caseload of fifteen would be ideal for that kind of approach. Philosophically, the agency leans toward outreach-based services. Staff do a lot of motivational interviewing, and the expectation is regular contacts between staff and clients. Dwight Walker asked how involved peer support workers are at WCMHS. Michael replied that it varies enormously depending upon individuals. Hours range from one every two weeks to almost full-time, and duties vary widely too.

David Mitchell made a motion that the Standing Committee's recommendation be full re-designation without conditions for Washington County Mental Health Services. Kitty seconded David's motion, and it passed with two abstentions because of conflict of interest on the part of two of the members present.

### **Vermont State Hospital Governing Body: Butch Alexander**

Butch Alexander, the Executive Director of Lamoille County Mental Health Services (LCMHS) and an at-large member appointed by Governor Douglas to the VSH Governing Body, came to today's meeting to give Standing Committee members a better understanding of how the Governing Body functions. He distributed diagrams to illustrate the difference between the administrative structure of a nonprofit organization such as LCMHS and that of VSH, embedded as it is in state government with a line of authority reaching up through several levels of the bureaucracy to the Governor's Office.

The Governing Body meets monthly, troubleshoots what is going on at VSH, and gets updates. Its future is uncertain, Butch said, especially in view of the potential connection with Fletcher Allen Health Care later on. Clare asked about the possibility of another independent board, say, resurrecting the old Board of Mental Health. Butch did not think the idea viable. A discussion of the recertification of the State Hospital ensued. Frank Reed explained that a good bit of the impetus behind the Governing Body was the desire to bring transparency to the management of VSH. Butch registered his opinion that the process is not transparent enough in that it does not reveal the tremendous work that VSH staff have been doing lately.

Marty asked Butch to tell more about the Governing Body's responsibilities in policy evaluation. Butch said that Terry and David Bond have worked really hard on policy development. The Governing Body scrutinizes each policy very carefully, sometimes for months. It is a very rewarding activity, Butch said. Clare remarked that perhaps one of the Standing Committee's jobs over the next however many years should be to support the State Hospital and help it do what needs to be done. She asked if the Department of Health is making any efforts in public relations in that regard. Frank said that some people have been giving the idea some thought, but there is nothing definite to report yet.

### **Membership Committee Report: Marty Roberts**

Marty reported that two earlier prospective members apparently are not interested in the Standing Committee anymore; they have not responded to e-mails. Two additional prospective members are here today: Sandi Knight and Dwight Walker. Lynn Colby, also present at today's meeting, is interested in the Governing Body.

Marty wondered what to do about Gladys Mooney. She has not been able to come to meetings in a long time. Her appointment formally expired on April 30 and she has not reapplied. We should think about what the Standing Committee wants to do.

Kitty said that she has some reservations about a person already recommended for membership. Frank offered to facilitate a conference call for the Membership Committee.

### **Search for Deputy Commissioner of Health for Mental Health Services: Marty**

Four candidates were interviewed last week, Marty said, and two more interviews are scheduled for tomorrow (that is, October 3). Information in the Mental Health Update to be posted on the Department of Health's website will describe the next steps in the search process.

### **VSH Futures Report: Frank Reed**

- ✧ The Division of Mental Health has filed a conceptual certificate of need for approval from the Department of Banking, Insurance, Securities, and Health Care Administration (BISHCA). Preliminary feedback from BISHCA is positive. A follow-up meeting is scheduled for October 18. If all goes well, actual determination on the application could be forthcoming in December.
- ✧ Second Spring, the first of two community residential recovery projects planned under the Futures initiative, is approaching final agreement on the part of the consortium (Washington County Mental Health Services, the Clara Martin Center, and the Howard Center for Human Services), the developer, and the state. Renovations will probably require sixty to ninety days. An optimistic opening date would be early in 2007.
- ✧ The work groups on housing and crisis beds both have reports that are nearing completion. One of the likely recommendations from the housing work group will be for more housing contingency funds.
- ✧ The first peer working group meeting is currently scheduled for November 2 but may be changed. The plan is to have one full-time peer support worker and several part-timers.
- ✧ For other scheduled meetings, see VDH's website.
- ✧ We have new draft language on conditional voluntary admissions and hopes for finalizing the statement in the next couple of weeks. Anyone with input to offer should e-mail Jill Olson at [Jill@vahhs.org](mailto:Jill@vahhs.org).
- ✧ A public psychiatry symposium on "Social Skills Training for Persons with Mental Illness" is scheduled for tomorrow afternoon, October 3, at 1:00 in the Skylight Conference Room.

### **Public Comment**

None today.

### **Items for the November Agenda**

- ∞ Introductions, Notes, and Other Recurring Items
- ∞ UCLA Training Modules: Tom Simpatico and Pam Fadness
- ∞ Regular Updates
- ∞ Public Comment